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Effective on 12/08/2004, Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4819).		Complete if Known	
FEE TRANSMITTAL For FY 2009		Application Number	10/049,327-Conf. #3596
		Filing Date	August 10, 2000
		First Named Inventor	Jay M. Meythaler
		Examiner Name	K.A. Cruz
		Art Unit	1617
		Attorney Docket No.	UAB-15102/22
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	555.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card
<input type="checkbox"/> Deposit Account	<input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____
Deposit Account Number: <u>07-1180</u> Deposit Account Name: <u>Gifford, Kress, Sprinkle, Anderson & Cilewski, P.C.</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES	
Fee Description	Fee (\$)
Each claim over 20 (including Reissues)	52
Each independent claim over 3 (including Reissues)	220
Multiple dependent claims	390
	195

Total Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
- 20 or HP		x		=			
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
- 3 or HP		x		=			
HP = highest number of independent claims paid for, if greater than 3.							

3. APPLICATION SIZE FEE	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
Total Sheets	Extra Sheets
Number of each additional 50 or fraction thereof	
Fee (\$)	Fees Paid (\$)
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____	

4. OTHER FEE(S)	
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2253 Extension for response within third month	
	555.00

SUBMITTED BY			
Signature	/Avery N. Goldstein, Ph.D./	Registration No. (Attorney/Agent)	39,204
Name (Print/Type)	Avery N. Goldstein, Ph.D.	Telephone	(248) 647-6000
		Date	September 4, 2009